

City of Newton
Direct Deposit Request

I hereby authorize and request the direct deposit of my net pay:

New ☐

Change ☐

Cancel ☐

NAME: _____

Dept. Name: _____ SS# (last 4 digits): XXX-XX- _____

BANK NAME: _____

CHECK ONE: Checking ☐ Savings ☐ Bank Code (HR Use) ☐☐☐

Attach a voided check or savings deposit slip here:

Changes to Existing Accounts (if applicable)

Signature _____ **Date** _____

Email (for payroll vouchers) _____

Note* Processing Time: Two pay cycles

Please return this completed form to the Human Resources Department, Newton City Hall, Rm 218